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**BEFORE THE  
MEDICAL BOARD OF CALIFORNIA  
DEPARTMENT OF CONSUMER AFFAIRS  
STATE OF CALIFORNIA**

In the Matter of the Decision and Order  
Against:

**Lauren Constance Anderson, M.D.  
124 Orchard Run  
Natchitoches, LA 71457-2806**

**Physician's and Surgeon's  
Certificate No. C158959**

**Case No. 800-2018-047495**

**AGREEMENT FOR  
SURRENDER OF LICENSE**

Respondent.

**TO ALL PARTIES:**

**IT IS HEREBY STIPULATED AND AGREED** by and between the parties to the  
above-entitled proceedings, that the following matters are true:

1. Complainant, Kimberly Kirchmeyer, is the Executive Director of the Medical  
Board of California, Department of Consumer Affairs ("Board").

2. Lauren Constance Anderson, M.D., ("Respondent") has carefully read and  
fully understands the effect of this Agreement.

3. Respondent understands that by signing this Agreement she is enabling the  
Board to issue this order accepting the surrender of license without further process.  
Respondent understands and agrees that Board staff and counsel for complainant may  
communicate directly with the Board regarding this Agreement, without notice to or  
participation by Respondent. The Board will not be disqualified from further action in this  
matter by virtue of its consideration of this Agreement.

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1       4.       Respondent acknowledges that on October 11, 2018, a Decision was rendered  
2 wherein her license was issued on a probationary basis for a period of five (5) years with  
3 various standard terms and conditions.

4       5.       The current disciplinary action provides in pertinent part, "Following the  
5 effective date of this Decision, if [Respondent] ceases practicing due to retirement, health  
6 reasons, or is otherwise unable to satisfy the terms and conditions of probation,  
7 [Respondent] may request to surrender of her license." (Condition #20).

8       6.       Upon acceptance of the Agreement by the Board, Respondent understands  
9 she will no longer be permitted to practice as a physician and surgeon in California, and  
10 also agrees to surrender her wallet certificate, wall license and D.E.A. Certificate(s).

11       7.       Respondent fully understands and agrees that if Respondent ever files an  
12 application for relicensure or reinstatement in the State of California, the Board shall treat  
13 it as a Petition for Reinstatement of a revoked license in effect at the time the Petition is  
14 filed. In addition, any Medical Board Investigation Report(s), including all referenced  
15 documents and other exhibits, upon which the Board is predicated, and any such  
16 Investigation Report(s), attachments, and other exhibits, that may be generated subsequent  
17 to the filing of this Agreement for Surrender of License, shall be admissible as direct  
18 evidence, and any time-based defenses, such as laches or any applicable statute of  
19 limitations, shall be waived when the Board determines whether to grant or deny the  
20 Petition.  
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ACCEPTANCE

I, Lauren Constance Anderson, M.D., have carefully read the above Agreement and enter into it freely and voluntarily, with the optional advice of counsel, and with full knowledge of its force and effect, do hereby surrender Physician's and Surgeon's Certificate No. C158959, to the Medical Board of California for its acceptance. By signing this Agreement for Surrender of License, I recognize that upon its formal acceptance by the Board, I will lose all rights and privileges to practice as a Physician and Surgeon in the State of California and that I have delivered to the Board my wallet certificate and wall license.

Lauren Constance Anderson  
Lauren Constance Anderson, M.D.

11/29/18  
Date

John C. Currier, Jr.  
Attorney or Witness

11/23/18  
Date

Kimberly Kirchmeyer  
Kimberly Kirchmeyer  
Executive Director  
Medical Board of California

November 30, 2018  
Date

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